UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

o	МВ АРР	ROVAL		
Number:	:	3	235-	0076
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Alerian Opportunity Partners VI, LP	
Filing Under (Check box(es) that apply):	07047961
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Alerian Opportunity Partners VI, LP	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone 2215 Cedar Springs Road, #1513, Dallas, TX 75201 214.855.5	Number (Including Area Code) 594
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone (if different from Executive Offices)	Number (Including Area Code)
Brief Description of Business Investment fund	MAD 2.2 2005
Type of Business Organization corporation limited partnership, already formed other (please specify) business trust limited partnership, to be formed	THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year 0 2 0 7	_

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



2. Enter the information requested for the following	owing:			
• Each promoter of the issuer, if the issuer	ier has been organized v	vithin the past five years;		
 Each beneficial owner having the pow securities of the issuer; 	ver to vote or dispose, or	direct the vote or disposit	tion of, 10% or me	ore of a class of equity
 Each executive officer and director of 	corporate issuers and of	f corporate general and ma	inaging partners o	f partnership issuers; and
 Each general and managing partner of 	partnership issuers.			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Alerian Opportunity Advisors VI, LLC				
Business or Residence Address (Number and S 2215 Cedar Springs Road, #1513, Dallas, TX 7		ode)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hammond, Gabriel				
Business or Residence Address (Number and S 2215 Cedar Springs Road, #1513, Dallas, TX 7				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Levy, Richard				
Business or Residence Address (Number and S 45 Rockefeller Plaza, New York, NY 10111				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Lyall, Susan				
Business or Residence Address (Number and S 30 Hook Road, Bedford, NY 10506-1112		·		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Robert and Ardis James Foundation				
Business or Residence Address (Number and S c/o Enterprise Asset Management, 475 Fifth A	venue, New York, NY 1	0017		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) River Rock Holdings, LLC				
Business or Residence Address (Number and S 7 Skyline Drive, 3rd Floor, Hawthorne, NY 10	532			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hartz Capital MLP, LLC			···	
Business or Residence Address (Number and S 400 Plaza Drive, Seacaucus, NJ 07049				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) EREF Special Situations, LLC				
Business or Residence Address (Number and S 405 Park Ave, New York, NY 10022	Street, City, State, Zip C	ode)		
(Use blank sho	eet, or copy and use add	itional copies of this sheet	, as necessary.)	

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A. BASIC IDENTIFICATION DATA

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 Each beneficial owner having the posecurities of the issuer; 	ower to vote or dispose, or	r direct the vote or disposi	tion of, 10% or m	ore of a class of equity
Each executive officer and director	of corporate issuers and o	f corporate general and ma	anaging partners o	f partnership issuers; and
 Each general and managing partner 	of partnership issuers.			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
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Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
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Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
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Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip C	code)		
(Use blank sheet, or copy and use additional	copies of this sheet, as ne	cessary.)		

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					В.	INFOR	MATIO	N ABOU	JT OFFE	ERING					
1.	Has the iss	uer sold,	or does t					dited inve						Yes 🔲	No
2.	What is the	minimu	m investr			•	-		-	-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$100	000
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												,,,,,,	Yes	No
3.	Does the of	ffering pe	ermit join	t owners	hip of a s	ingle uni	t?					***********			
4.	Enter the i	nformati	on reque	sted for	each per	son who	has bee	n or will	l be paid	or give	n, directl	y or ind	irectly, any he offering.		
		st the na	me of the	broker o	r dealer.	If more	than five	(5) perso	ons to be				with a state ns of such a		
Full	Name (Las	t name f	rst, if ind	lividual)					-				-		
				·											
Bus	iness or Res	sidence A	Address (?	Number a	ind Street	t, City, St	ate, Zip (Code)							
Nan	ne of Assoc	iated Bro	ker or Do	ealer											
State	es in Which	Person	Listed Ha	s Solicite	ed or Inte	nds to Sc	licit Puro	hasers							
	(Check "Al	ll States"	or check	individu	al States)	·								🔲 4	All States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID		
	II	IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	MM	NY	NC	ND	ОН	ОK	OR	PA		
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					14	011		VA	VVA	[VV V]	1 A T		EIA		
rull	Name (Las	t name i	irst, ii inc	lividual)											
Bus	iness or Res	sidence A	Address (1	Number a	and Street	t, City, S	tate, Zip (Code)	-					• •	
Nan	ne of Assoc	iated Bro	ker or D	ealer			-								
State	es in Which	Person	Listed Ha	s Solicite	ed or Inte	nds to So	olicit Puro	chasers							
	(Check "A	ll States"	or check	individu	al States)									🔲 4	All States
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	RI	sc	SD	TN	TX	UT	VT	VA	WA	₩V	WI	WY	PR		
Full	Name (Las	t name f	irst, if ind	lividual)											
Bus	iness or Res	sidence A	Address (1	Number a	ınd Street	t, City, St	tate, Zip (Code)		-					
Nan	ne of Assoc	iated Bro	ker or D	ealer											
Stat	es in Which									•			·		
(Check "All States" or check individual States)						🔲 ،	All States								
	AL	AK	ΑZ	AR	CA	CO	CT	DE	БC	FL	GA	HI	ID		
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	MT	NE	NV	NH	UNJ	NM	NY	NC	ND	ОН	ОK	ŌR	PA		
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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE	S AND USE OF PROC	EEDS
١.	Enter the aggregate offering price of securities included in this offering and the total a already sold. Enter "0" if answer is "none" or "zero." If the transaction is an excoffering, check this box and indicate in the columns below the amounts of the sec	change	
	offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	f 0	\$ 0
	P '.	\$ <u>0</u>	- \$ 0
		5	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ 0	_ \$ _0
	Partnership Interests	\$ 18,112,500	\$ _18,112,500
	Other (Specify	<u></u> ֆ <u>U</u>	_ \$ _0
	Total	\$ _18,112,500	\$ 18,112,500
	Answer also in Appendix, Column 3, if filing une	der ULOE.	
2.	Enter the number of accredited and non-accredited investors who have purchased sec in this offering and the aggregate dollar amounts of their purchases. For offerings Rule 504, indicate the number of persons who have purchased securities and the agg dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "ze	under gregate	
			Aggregate
		Number of	Dollar Amount
		Investors	of Purchases
	Accredited Investors	25	\$ 18,112,500
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)	···	\$
	Answer also in Appendix, Column 4, if filing une	der ULOE.	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested securities sold by the issuer, to date, in offerings of the types indicated, in the twelve months prior to the first sale of securities in this offering. Classify securities by type lie Part C - Question 1.	ve (12)	
	Type of Offering	Security	Dollar Amount
	D. 1- 505	Becarity	Sold
	Rule 505		_ \$
	Regulation A	•••	_ \$
	Rule 504		_ \$
	Total		_ \$
1 .	a. Furnish a statement of all expenses in connection with the issuance and distribution securities in this offering. Exclude amounts relating solely to organization expenses issuer. The information may be given as subject to further contingencies. If the amount expenditure is not known, furnish an estimate and check the box to the left estimate.	of the	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	П	\$
		··· 🛱	\$ 115,000
	A		\$
	Engineering Food		\$ 15,000
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	H	<u> </u>
	Ones Expenses (nemity)		<u> </u>
	Total	IYI	\$ 130,000

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND USE OF PRO	CEEDS
b. Enter the difference between the aggregate offering price given in response to Question 1 and total expenses furnished in response to Part C — Question difference is the "adjusted gross proceeds to the issuer."	o Part C — 4.a. This	\$ 17,982,500
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proused for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payments equal the adjusted gross proceeds to the issuer set forth in responses to Part C – 4.b above.	n, furnish an s listed must	
4.0 80070.	Payments to Officers Directors & Affiliate	
Salaries and fees	\$	
Purchase of real estate	□ €	
Purchase, rental or leasing and installation of machinery and equipment		_
Construction or leasing of plant buildings and facilities		\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the		
assets or securities of another issuer pursuant to a merger)	\$ <u></u>	
Repayment of indebtedness		
Working capital		
Other (specify): Investments in Portfolio Securities and hedging	\$	🛛 \$ _17,982,500
Column Totals	S 0	🛛 \$ _17,982,500
Total Payments Listed (column totals added)		17,982,500
D. FEDERAL SIGNATUR	RE	
The issuer has duly caused this notice to be signed by the undersigned duly authorized following signature constitutes an undertaking by the issuer to furnish to the U.S. Sec of its staff, the information furnished by the issuer to any non-accredited investor pure	surities and Exchange Comm suant to paragraph (b)(2) of l	ission, upon written request
Issuer (Print or Type) Signature Signature	Date 3/8/	12007
Name of Signer (Print or Type) Title of Signer (Print or Type)	, ,	•
Colored Hammore Managing Manuar		
ATTENTION		
ATTENTION Intentional misstatements or omissions of fact constitute federal	criminal violations (See 1	8 U.S.C. 1001.)

END